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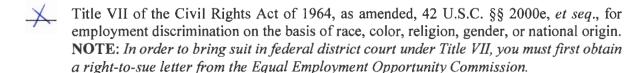
U. S. DISTRICT COURT
EASTERN DISTRICT OF MO
ST. LOUIS

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MISSOURI DIVISION

Plaintiff(s), Michelle W. Allen)))
v. Amazon com, Inc) Case No. 28E-2021-00217) (to be assigned by Clerk of District Court)
) JURY TRIAL DEMANDED Output Description (1)
Defendant(s). (Enter above the full name(s) of all defendants in this lawsuit. Please attach additional sheets if necessary.)) YES NO))

EMPLOYMENT DISCRIMINATION COMPLAINT

1. This employment discrimination lawsuit is based on (check only those that apply):



Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. §§ 621, et seq., for employment discrimination on the basis of age (age 40 or older).

NOTE: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file charges with the Equal Employment Opportunity

Americans with Disabilities Act of 1990, as amended, 42 U.S.C. §§ 12101, et seq., for employment discrimination on the basis of disability.

Commission.

NOTE: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a right-to-sue letter from the Equal Employment Opportunity Commission.

Rehabilitation Act of 1973, as amended, 29 U.S.C. §§ 701, et seq., for employment discrimination on the basis of a disability by an employer which constitutes a program or activity receiving federal financial assistance. NOTE: In order to bring suit in federal district court under the Rehabilitation Act of 1973, you must first file charges with the appropriate Equal Employment Office representative or agency.	
Other (Describe)	
PARTIES	
2. Plaintiff's name: Mehelle NAller	
Plaintiff's address: 227 Emerling Dr	
Street address or P.O. Box	
Cool Valla MO 6312	-1
City/ County/-State/Zip Code	
(314)765.5323	
Area code and telephone number	
3. Defendant's name: Amazon com, Inc. Ath	Littler Mandelsm
Defendant's address: 230) McGee Strut S	Suite 800
Street address or P.O. Box	
City/County/State/Zip Code	108
(3D5) 4DD 7595	_
Area code and telephone number	

NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES, ADDRESSES AND TELEPHONE NUMBERS ON A SEPARATE SHEET OF PAPER.

4. If you are claiming that the discriminatory conduct occurred at a different location,
please provide the following information:
please provide the following information: St. Detus MD (330) (Street Address) (City/County) (State) (Zip Code)
5. When did the discrimination occur? Please give the date or time period:
10/2020
ADMINISTRATIVE PROCEDURES
6. Did you file a charge of discrimination against the defendant(s) with the Missouri
Commission on Human Rights?
Yes Date filed: 12 27 2020
No
7. Did you file a charge of discrimination against the defendant(s) with the Equal
Employment Opportunity Commission or other federal agency?
Yes Date filed: 12 27 2020 No
NO
8. Have you received a Notice of Right-to-Sue Letter?
Yes No
If yes, please attach a copy of the letter to this complaint.
9. If you are claiming age discrimination, check one of the following:
60 days or more have passed since I filed my charge of age discrimination with the
Equal Employment Opportunity Commission.
fe wer than 60 days have passed since I filed my charge of age discrimination with the
Equal Employment Opportunity Commission.

NATURE OF THE CASE

10.	The conduct complained of in this lawsuit involves (check only those that apply):
	failure to hire me
	termination of my employment
	failure to promote me
	failure to accommodate my disability
	terms and conditions of my employment differ from those of similar employees
	retaliation
	harassment
	other conduct (specify): race, color, sex
Did	you complain about this same conduct in your charge of discrimination?
	Yes No

11.	I believe that I was discriminated against because of my (check all that apply):
	race
	religion
	national origin
	color
	gender
	disability
	\sim age (birth year is: ~ 1976)
	other:
Did yo	u state the same reason(s) in your charge of discrimination?
	YesNo
is involved in t	State here, as briefly and clearly as possible, the essential facts of your claim. fically the conduct that you believe is discriminatory and describe how each defendant the conduct. Take time to organize your statement; you may use numbered paragraphs elpful. It is not necessary to make legal arguments, or to cite cases or statutes.

(Attach additional sheets as necessary).

13. The acts set forth in paragraph 12 of this complaint:

_____ are still being committed by the defendant.

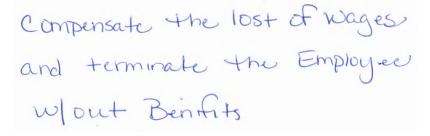
_____ are no longer being committed by the defendant.

_____ may still be being committed by the defendant.

REQUEST FOR RELIEF

State briefly and exactly what you want the Court to do for you. Make no legal arguments;

cite no cases or statutes.



14. Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 25thday of Ctober 20 21.

Signature of Plaintiff